

Agency Electronic Health Record System Task Force Webinar

Wednesday, March 10, 2010

Helen F. Shoemaker, RN, MS, COHN-S/CM

Agenda

- EHR Project Update
- Medgate User Group Conference
 - Networking Opportunities
 - Enhancements
 - GX
- Configurations Issues
 - Labs
 - CPT/ICD-9 Codes
 - Discretionary Tests
 - Immunization Series
 - Visits and Revisits
 - Protocols Outside of Recall Definitions
 - Billing
 - Clinical Workflows
- Action Items

EHRIS Project Update

- Contract modification with Medgate
- Contract for hosting
- Disaster recovery site
- EHRIS Project Team
 - System testing and configuration
 - Demographic feed
 - Audiograms
 - Laboratory interfaces
- EHRIS Records Management Plan

Medgate User Group Conference

- Networking
- Enhancements
- Medgate GX
 - Configurable
 - Custom views
 - Screens standardized
 - Generic import utility
 - Vaccine inventory module
 - Letters
 - Dashboard

Configuration: Labs

- Laboratory requirements
 - Review Center specific lab requirements submitted
 - CBC, CMP
 - Lipid Profiles

New Save Delete Cancel List Record History

Created Date 02/25/2010

Sample ID 50

Employee Carroll, Ansley UID033943

Sample Date 02/24/2010 *

Sample Time 08:00

Sample Type Blood

Fasting ☒ Verified? ☐ Private Data ☐

Specimen ID

Health Center KSCCLIN Kennedy Space Center_OH Clinic

Practitioner SHOEMAKER Helen Shoemaker, RN

Medications

Comments

Signed By

Signed Date/Time

Sign

NASA CENTER KSC Kennedy Space Center

EMPLOYER UNK UNKNOWN

EMPLOYEE TYPE NCONTRCTR NASA Contractor

MAIL CODE 202-3 202-3

BLDG 29 29

Job Position

Shift

Batteries

New

Battery	Lab	Results Date
Complete Blood Count	KSCWUEST	02/25/2010
Complete Metabolic Panel	KSCWUEST	02/25/2010

Configuration: Labs

https://aspl3.medgate.com/nasatest60/ClinicalTest/ClinicalTestSampleBatteries.ASP?argSampleID=- Wind...

Clinical Test Sample Batteries

New Save Delete Cancel Close Record History

Created Date 02/25/2010

Employee: Carroll, Ansley UID033943 Sample ID: 50 Sample Date: 02/24/2010

Battery *

Lab *

Results Date

Test	Results Flag	Result	Units	Lab Range	Current Range	Comments
Alkaline Phosphatase						
Serum Albumin						
Bilirubin Total						
Blood Glucose						
Aspartate Aminotransferase						
Alanine Aminotransferase						
Blood Urea Nitrogen						
Calcium						
Potassium						
Sodium						
Total Protein						
Carbon Dioxide						
Chloride						
Creatinine, Serum						

Configuration: Codes

- ICD-9 Codes
 - 401 Essential Hypertension
 - 250 Diabetes Mellitus
- NASA Codes
 - 000DX043 Hypertension
 - 000DX019 Diabetes Mellitus
- CPT Codes
 - 85049 CBC (Blood Cell Count)
 - 99173 Screening test of visual acuity, quantitative, bilateral
- NASA Codes:
 - 000PR002 Audiogram
 - 000PR013 EKG

Configuration: Activity Counts

- Visits and Revisits
 - Total number of visits by visit reason
 - Number of revisits?
- Exam Activities
 - Examination Types
 - Lead Surveillance
 - Health Maintenance Exams
 - Fitness Center Clearance
 - Activities
 - Audiogram
 - CBC
 - Vision
- Immunizations

Report: Clinic Visit Reasons

NASA OCCUPATIONAL HEALTH

medgate

Clinic Visit Counts by Visit Reason

Page 1 / 1
Date 03/08/2010
Report ClinicVisitUtilization_SQL.rpt

Visit Date from 02/17/2010 to 02/26/2010

Visit Reason	Number of Visits	Percentage
Primary Prevention	8	33.33%
Surveillance/Certification/Clearance	8	33.33%
Non-Occupational Illness/Injury	3	12.50%
Occupational Illness/Injury	2	8.33%
Fitness For Duty	1	4.17%
International Travel	1	4.17%
Pre-Placement	1	4.17%
Total:	24	100.00%

Occupational Injury w/ Revisit

Medgate 6.0 SP3a Carroll, Adrianna (UID090872) DO...

medgate EMR
Carroll, Adrianna UID090872

[Review Unsigned Notes](#) [Reports](#)

Clear Selection
Demographics
► Medical
Audiometric
Body Fluid Exposure
Clinic Visit
Clinical Testing
Documents
Drug Testing
EMR
Inbox
Immunization
Letters
Problem List
Pulmonary Function
Questionnaire
Recalls
Scheduling
Travel
Vision
► Safety
► Case Management
► IH/Environmental
► Education
Reports
Base Tables
Report Writer
Administrator
Logout

Summary Activity Plan Details Dx Meds & Allergies Indicators Travel Imm Absences Restrictions Notes



Visits [New](#)

Date	Visit Reason	Case No	Primary Diagnosis
02/18/2010	OCC	2010106	LACERATION/ABRASION/PUNCTURE, HAND
02/17/2010	OCC	2010106	LACERATION/ABRASION/PUNCTURE, HAND

Problem List [Print](#)

Problem	Date	Description
---------	------	-------------

Items to sign/verify

Open Doc.	Type	Date	Received From	Practitioner
	DDR	02/18/2010		
	DDR	02/18/2010		

Clinical Visits and Revisits

medgate EMR Carroll, Ansley UID033943 Review Unsigned Notes Reports

Clear Selection

Demographics

► Medical

Audiometric

Body Fluid Exposure

Clinic Visit

Clinical Testing

Documents

Drug Testing

EMR

Inbox

Immunization

Letters

Problem List

Pulmonary Function

Questionnaire

Recalls

Scheduling

Travel

Vision

► Safety

► Case Management

► IH/Environmental

► Education

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Summary Activity Plan Details Dx Meds & Allergies Indicators Travel Imm Absences Restrictions Notes

Visits New

Date	Visit Reason	Case No	Primary Diagnosis
02/26/2010	SRVCERTCLR	2010119	EXAM HEALTH MAINTENANCE
02/24/2010	SRVCERTCLR	2010119	EXAM HEALTH MAINTENANCE
02/24/2010	SRVCERTCLR	2010119	EXAM HEALTH MAINTENANCE

Problem List Print

Problem	Date	Description

Items to sign/verify

Open Doc.	Type	Date	Received From	Practitioner
	Blood	02/24/2010	KSCWUEST	Helen Shoemaker, RN
	Fecal	02/24/2010	CLIA_INHSE	Helen Shoemaker, RN
	Urine	03/03/2010	KSCWUEST	Helen Shoemaker, RN

Clinic Visits and Revisits

medgate EMR Carroll, Audrey UID081636 Review Unsigned Notes Reports

Clear Selection Demographics

► Medical

Audiometric

Body Fluid Exposure

Clinic Visit

Clinical Testing

Documents

Drug Testing

EMR

Inbox

Immunization

Letters

Problem List

Pulmonary Function

Questionnaire

Recalls

Scheduling

Travel

Vision

► Safety

► Case Management

► IH/Environmental

► Education

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Logout

Summary Activity Plan Details Dx Meds & Allergies Indicators Travel Imm Absences Restrictions Notes

Visits New

Date	Visit Reason	Case No	Primary Diagnosis
02/24/2010	SRVCERTCLR	2010124	EXAM HEALTH MAINTENANCE

Problem List Print

Problem	Date	Description
---------	------	-------------

Items to sign/verify

Open Doc.	Type	Date	Received From	Practitioner
	Blood	02/24/2010	KSCWUEST	Helen Shoemaker, RN
	Fecal	03/01/2010	CLIA_INHSE	Helen Shoemaker, RN
	Urine	03/04/2010	KSCWUEST	Helen Shoemaker, RN

Report: Clinic Visit Activity

NASA OCCUPATIONAL HEALTH		medgate
Clinic Visit Counts by Activity		Page 1
		Date 03/08/2010
		Report ClinicVisitUtilization_SQL.rpt
Visit Date from Report Title (String) 5/2010		
Activity	Number of Visits	Percentage
Physical Examination	6	7.14 %
Audiogram	5	5.95 %
Complete Metabolic Panel	3	3.57 %
Pulmonary Function Test	3	3.57 %
Urinalysis	3	3.57 %
Vision Screening/Evaluation	3	3.57 %
Health Maintenance Exam Complete	2	2.38 %
Antigen Administration	2	2.38 %
Blood Glucose Inhouse/Glucometer	2	2.38 %
Body Mass Index / % Body Fat Screen	2	2.38 %
Complete Blood Count	2	2.38 %
Electrocardiogram	2	2.38 %
Exercise Stress Test	2	2.38 %
Fecal, Occult Blood Sample	2	2.38 %
Health Risk Assessment Offered	2	2.38 %
Medical History Questionnaire	2	2.38 %
Occupational History Questionnaire	2	2.38 %
Skin Cancer Screening Offered	2	2.38 %
Tdap Vaccination	2	2.38 %
Fitness Center Clearance	1	1.19 %
Hearing Conserv/Noise Surveillance Group	1	1.19 %
Lead Surveillance Group	1	1.19 %
Occupational Respirator Med Certification	1	1.19 %
Blood Pressure Screen	1	1.19 %
Breast Examination	1	1.19 %
Breast Self-Examination Education	1	1.19 %
CBC w/Differential and RBC Morphology (Smear)	1	1.19 %

	A	B	C
1	MEDICAL SURVEILLANCE EXAMS AND EXAM ACTIVITIES		
2	Activity	Number	Percentage
3	***Fitness Center Clearance***	1	1.19%
4	***Health Maintenance Exam Complete***	2	2.38%
5	***Hearing Conserv/Noise Surveillance Group***	1	1.19%
6	***Lead Surveillance Group***	1	1.19%
7	***Occupational Respirator Med Certification***	1	1.19%
8	Antigen Administration	2	2.38%
9	Audiogram	5	5.95%
10	Blood Glucose Inhouse/Glucometer	2	2.38%
11	Blood Pressure Screen	1	1.19%
12	Body Mass Index / % Body Fat Screen	2	2.38%
13	Breast Examination	1	1.19%
14	Breast Self-Examination Education	1	1.19%
15	CBC w/Differential and RBC Morphology (Smear)	1	1.19%
16	Chart Review	1	1.19%
17	Complete Blood Count	2	2.38%
18	Complete Metabolic Panel	3	3.57%
19	Discretionary Vaccines Offered/Status Addressed	1	1.19%
20	Duty Status Report/Restrictions	1	1.19%
21	Electrocardiogram	2	2.38%
22	Exercise Stress Test	2	2.38%
23	Fecal, Occult Blood Sample	2	2.38%
24	Health Risk Assessment Offered	2	2.38%
25	Hearing Conservation Questionnaire	1	1.19%
26	Influenza Vaccine	1	1.19%
27	Lead, Blood	1	1.19%
28	Lipid Profile	1	1.19%
29	Measles, Mumps, Rubella Vaccine	1	1.19%
30	Medical History Questionnaire	2	2.38%
31	Occupational History Questionnaire	2	2.38%
32	Pap Smear	1	1.19%
33	Physical Activity Readiness Questionnaire	1	1.19%
34	Physical Examination	6	7.14%
35	Polio Vaccine	1	1.19%
36	Pulmonary Function Test	3	3.57%
37	Respirator Medical Certification Letter	1	1.19%
38	Respirator OSHA Questionnaire	1	1.19%
39	Skin Cancer Screening Offered	2	2.38%
40	Smoking Cessation Program	1	1.19%
41	Standard Certification/Clearance Letter	1	1.19%
42	Standard Written Medical Opinion	1	1.19%
43	Tdap Vaccination	2	2.38%
44	Tetanus & Diphtheria Vaccination (Td)	1	1.19%
45	Travel Health Examination	1	1.19%
46	Travel Kit	1	1.19%
47	Urinalysis	3	3.57%
48	Urinalysis with Microscopic	1	1.19%
49	Urine Dip Screen	1	1.19%
50	Vision Screening/Evaluation	3	3.57%
51	Zinc Protoporphyrin	1	1.19%
52		84	100.00%

Report: Immunization Counts

NASA OCCUPATIONAL HEALTH

medgate

Immunization Counts Report

Page 1 / 1
Date 03/08/2010
Report ImmunizationCountsReport.rpt


Date from 02/17/2010 to 03/26/2010

Immunization/Test	Total By Immunization	% of Total
Tetanus, Diphtheria, Pertussis	2	33.33%
Influenza Vaccine	1	16.67%
Measles, Mumps, Rubella	1	16.67%
Polio (Inactivated) Vaccine IPV	1	16.67%
Tetanus & Diphtheria	1	16.67%
Total:	6	100.00%

Configuration: Exam Activities

- Medical History Questionnaire
- Occupational History questionnaire
- Discretionary tests offered/status addressed
- Immunization series offered/status addressed
- Protocols outside of recall definitions
 - Length of exposure, e.g., silica dust
 - Abnormal lab results, e.g., lead, cadmium
 - Exam frequency, e.g., beryllium, DOT

Discretionary Vaccines



Clinic Visit

Clear Selection

Demographics

Medical

Pulmonary Function

Questionnaire

Recalls

Scheduling

Travel

Vision

Safety

Case Management

IH/Environmental

Education

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List

Details

OSHA

Diagnoses

Procedures

Allergies / Medications

Notes

Absences

Exam Activities

Referrals

Documents

Employee: Zulauf, Abner UID087441

Case No: 2010126

Visit Reason: SRVCERTCLR

Treatment Date: 02/04/2010

Selected	Activity	Module	Last Test Date	Due Date	Scheduled Date	Status this Visit	Practitioner	Pass/Fail
<input checked="" type="checkbox"/>	***Healthcare Provider Exam***			NOW		InComplete	SHOEMAKER	
<input checked="" type="checkbox"/>	Hepatitis B Series Offered/Status Addressed			NOW		InComplete	SHOEMAKER	
<input checked="" type="checkbox"/>	Medical History Questionnaire			NOW		InComplete	SHOEMAKER	
<input checked="" type="checkbox"/>	Occupational History Questionnaire			NOW		InComplete	SHOEMAKER	
<input checked="" type="checkbox"/>	Physical Examination			NOW		InComplete	SHOEMAKER	
<input checked="" type="checkbox"/>	TB Mantoux Test (PPD)			NOW		InComplete	SHOEMAKER	
<input type="checkbox"/>	Add another activity							

Employee SURV/CERTs and Clearance:

New

Select	Completed	SURV/CERT	Start Date	End Date	Clearance Status	Clearance Effective Date	Clearance Expiration Date	Practitioner
<input type="checkbox"/>	<input type="checkbox"/>	HEALTHCAREPROV	02/04/2010					

Discretionary Vaccines

Medgate 6.0 SP3a Green, Bo (UID042638) DOB: 11/2...

medgate Clinic Visit

List Details OSHA Diagnoses Procedures Allergies / Medications Notes Absences Exam Activities Referrals Documents

Clear Selection

Demographics Employee: Green, Bo UID042638 Case No: 2010127 Visit Reason: SRVCERTCLR Treatment Date: 02/08/2010

Selected	Activity	Module	Last Test Date	Due Date	Scheduled Date	Status this Visit	Practitioner	Pass/Fail
<input checked="" type="checkbox"/>	***Water and Sewage Surveillance Group***			NOW		InComplete	SHOEMAKER	
<input checked="" type="checkbox"/>	Hepatitis A Series Offered/Status Addressed			NOW		InComplete	SHOEMAKER	
<input checked="" type="checkbox"/>	Hepatitis B Series Offered/Status Addressed			NOW		InComplete	SHOEMAKER	
<input checked="" type="checkbox"/>	Medical History Questionnaire			NOW		InComplete	SHOEMAKER	
<input checked="" type="checkbox"/>	Occupational History Questionnaire			NOW		InComplete	SHOEMAKER	
<input checked="" type="checkbox"/>	Physical Examination			NOW		InComplete	SHOEMAKER	
<input checked="" type="checkbox"/>	Tetanus & Diphtheria Vac Offered/Status Addressed			NOW		InComplete	SHOEMAKER	
<input type="checkbox"/>	Add another activity							

Pulmonary Function

Questionnaire Employee SURV/CERTs and Clearance: New

Select	Completed	SURV/CERT	Start Date	End Date	Clearance Status	Clearance Effective Date	Clearance Expiration Date	Practitioner
<input type="checkbox"/>	<input type="checkbox"/>	WATERSEWAGE	02/08/2010					

Safety

Case Management

IH/Environmental

Education

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Main Content Frame

		From	To	Date	Date	Gap	Period	
Audiogram	B	0	99			1	y	<input checked="" type="checkbox"/>
CBC w/Differential and Platelets	B	0	99			1	y	<input checked="" type="checkbox"/>
Comprehensive Metabolic Panel	B	0	99			1	y	<input checked="" type="checkbox"/>
Discretionary Tests Offered/Status Addressed	B	0	99			1	y	<input checked="" type="checkbox"/>
Electrocardiogram	B	0	99			1	y	<input checked="" type="checkbox"/>
Firefighter Certification Letter	B	0	99			1	y	<input checked="" type="checkbox"/>
Firefighter Medical Certification	B	0	99			1	y	<input checked="" type="checkbox"/>
Hepatitis A Series Offered/Status Addressed	B	0	99			1	y	<input checked="" type="checkbox"/>
Hepatitis B Series Offered/Status Addressed	B	0	99			1	y	<input checked="" type="checkbox"/>
Hepatitis B Surf Ab Titer Offered/Status Addressed	B	0	99			1	y	<input checked="" type="checkbox"/>
Hepatitis C Antibody	B	0	99					<input checked="" type="checkbox"/>
Lipid Profile / Panel	B	0	99			1	y	<input checked="" type="checkbox"/>
Mammogram	F	40	99			1	y	<input checked="" type="checkbox"/>
Medical History Questionnaire	B	0	99			1	y	<input checked="" type="checkbox"/>
Measles, Mumps, Rubella Vac Offered/Status Addr	B	0	99			1	y	<input checked="" type="checkbox"/>
Occupational History Questionnaire	B	0	99			1	y	<input checked="" type="checkbox"/>
Pulmonary Function Test	B	0	99			1	y	<input checked="" type="checkbox"/>
Physical Examination	B	0	99			1	y	<input checked="" type="checkbox"/>
Polio Vaccine Offered/Status Addressed	B	0	99			1	y	<input checked="" type="checkbox"/>
TB Mantoux Test (PPD)	B	0	99			1	y	<input checked="" type="checkbox"/>
Prostate Specific Antigen Test	M	50	99			1	y	<input checked="" type="checkbox"/>
Tetanus & Diphtheria Vaccination (Td)	B	0	99			10	y	<input checked="" type="checkbox"/>
Urinalysis with Microscopic	B	0	99			1	y	<input checked="" type="checkbox"/>
Varicella Vaccine Offered/Status Addressed	B	0	99			1	y	<input checked="" type="checkbox"/>
Vision Screening/Evaluation	B	0	99			1	y	<input checked="" type="checkbox"/>
X-Ray, Chest (14 x 17 PA View)	B	0	99			5	y	<input checked="" type="checkbox"/>

Configuration: Billing

- Which Centers are required to bill back some/all clients for clinical services?
 - Who are you billing?
 - Contractors
 - Other Federal agencies
 - Insurance
 - Other
 - How will you need the data?
 - Company
 - Contract
 - Other
 - What data?
 - Single fee by exam type
 - Itemized
 - Other

Action Items

- All Centers
 - Review and update the labs for each exam protocol.
 - Send updated/new labs and protocols to Nancy Eckhardt.
- Agency OH Office
 - Send each Center a copy of their spreadsheet with labs submitted.
 - Update base tables (labs and exam protocols) after receipt from Centers.
 - Request environmental copy (Medgate) so Centers can review any Center specific protocols in the Medgate test environment.
 - Schedule reviews of labs/protocols and discuss workflow process issues with each Center.
 - Collect additional information on the impact of OHM.
 - Contact Safety regarding the IRIS reporting requirements (ICD-9 code versus diagnosis).
 - Evaluate the use of SNOMED for diagnosis codes in Medgate.
 - Schedule another meeting to revisit diagnosis codes, procedure codes, billing, and indicators.